

APR 22 2008

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Preparer of this slip has confirmed that facsimile number given is correct: 11641/LDS

Comments:

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|---|------------------------|---------------|
| REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS | Application Number | 10/500,518 |
| | Filing Date | March 1, 2005 |
| | First Named Inventor | Norbert HESKE |
| | Art Unit | 3736 |
| | Examiner Name | B. S. SZMAL |
| | Attorney Docket Number | 297912004300 |

Enclosed are the following documents:

1. Transmittal – 1 page
2. Request for Withdrawal as Attorney or Agent and Change of Correspondence Address – 1 page

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| TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small> | Application Number | 10/500,518 | |
| | Filing Date | March 1, 2005 | |
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| | Art Unit | 3736 | |
| | Examiner Name | B. S. SZMAL | |
| Total Number of Pages in This Submission | 2 | Attorney Docket Number | 297912004300 |

| ENCLOSURES (Check all that apply) | | |
|---|--|---|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Request for Withdrawal as Attorney or Agent and Change of Correspondence Address - 1 page |
| Remarks: _____ | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | |
|--|---|-----------------|
| Firm Name | MORRISON & FOERSTER LLP | |
| Signature |  | |
| Printed name | Vincent J. Belusko | |
| Date | April 15, 2008 | Reg. No. 30,820 |

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| | Examiner Name | B. S. SZMAL |
| | Attorney Docket Number | 297912004300 |

To: Commissioner for Patents
 P.O. Box 1450
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Please withdraw me as attorney or agent for the above identified patent application, and

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| <input checked="" type="checkbox"/> Firm or Individual Name | Todd W. Wight Rutan & Tucker LLP | | |
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| City | Costa Mesa | State | California |
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| Signature |  | | |
| Name | Vincent J. Belusko | Registration No. | 30,820 |
| Date | April 15, 2008 | Telephone No. | (213) 892-5593 |

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